



Advanced Practice Clinicians

The Leadership Institute
5/16/18

 **Advocate Health Care**
Tomorrow starts today.

Today's Agenda

- Emerging Role and Background
- Advocate Strategy
- Challenges
- Lessons Learned
- Discussion

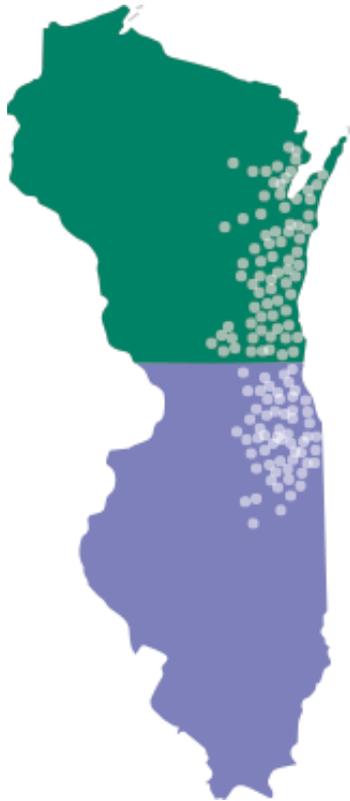
AdvocateAuroraHealth



Advocate Health Care



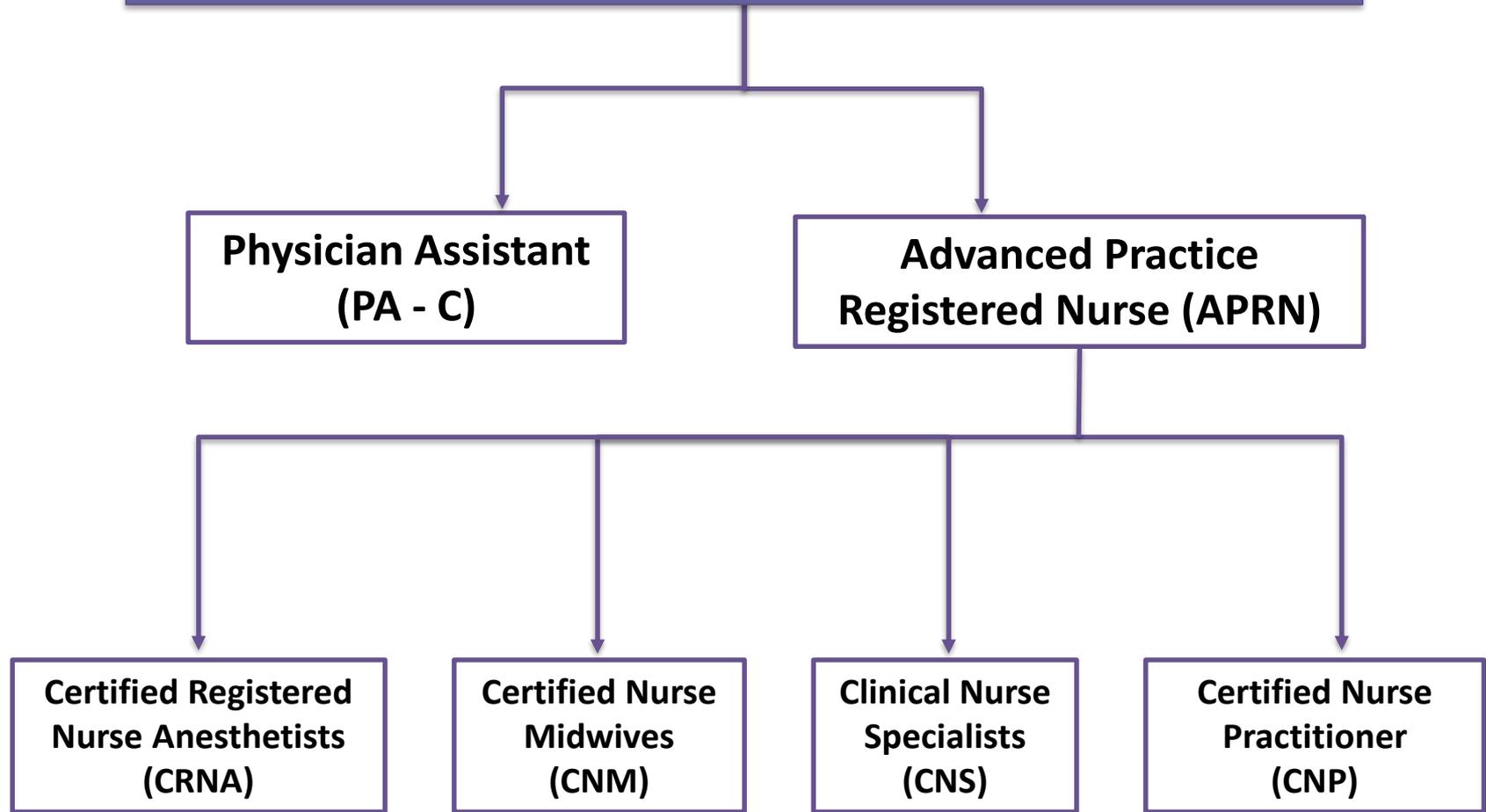
Aurora Health Care®



- 27 hospitals
- 500 outpatient locations
- 70,000 employees
- More than 3,000 employed physicians
- More than 2,000 APCs
- 4,800 aligned physician partners
- 3.5 million unique patients
- Nearly \$2 billion in community benefits
- 10th largest health system in the nation



Advocate Health Care Advanced Practice Clinician (APC)



Setting the Stage

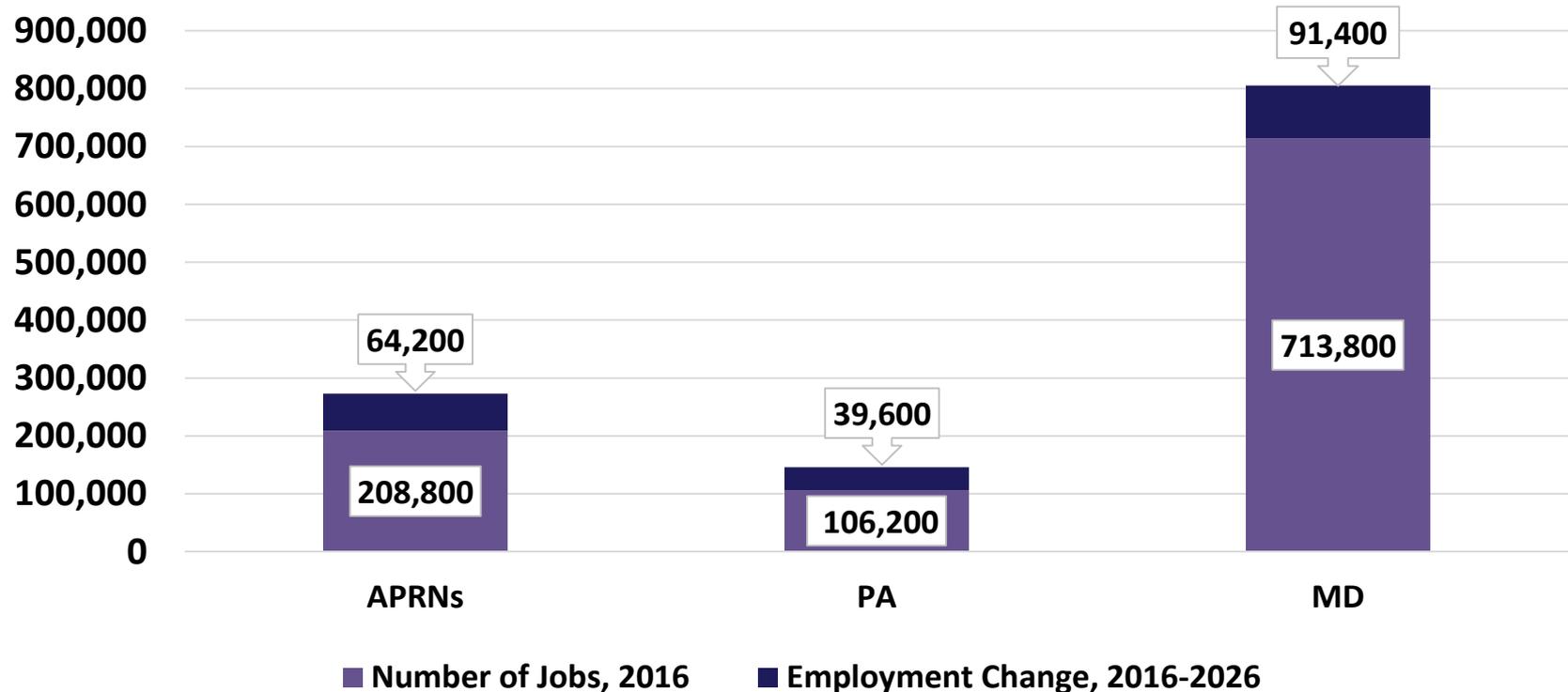
-  Shrinking health care dollar
-  Increasing need for services across the continuum
-  Access challenges
-  Physician shortages
-  Evolving care delivery models
-  Focus on value and quality outcomes

Emerging Role of the APC

- APCs as the primary care provider
- Increasing autonomy
- Acceptance by the payors
- Evolving legislation with full practice authority
- APCs in specialty care

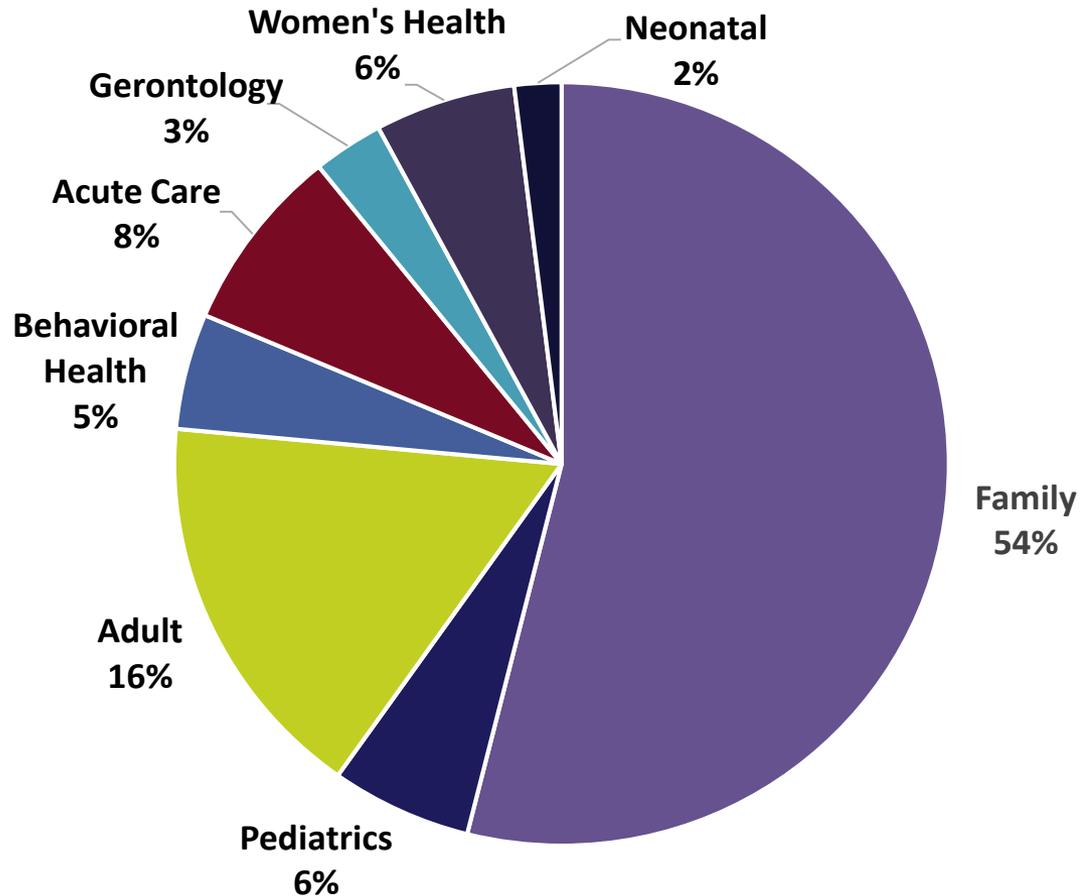
US Department of Labor Outlook - APCs

US Department of Labor Occupational Outlook



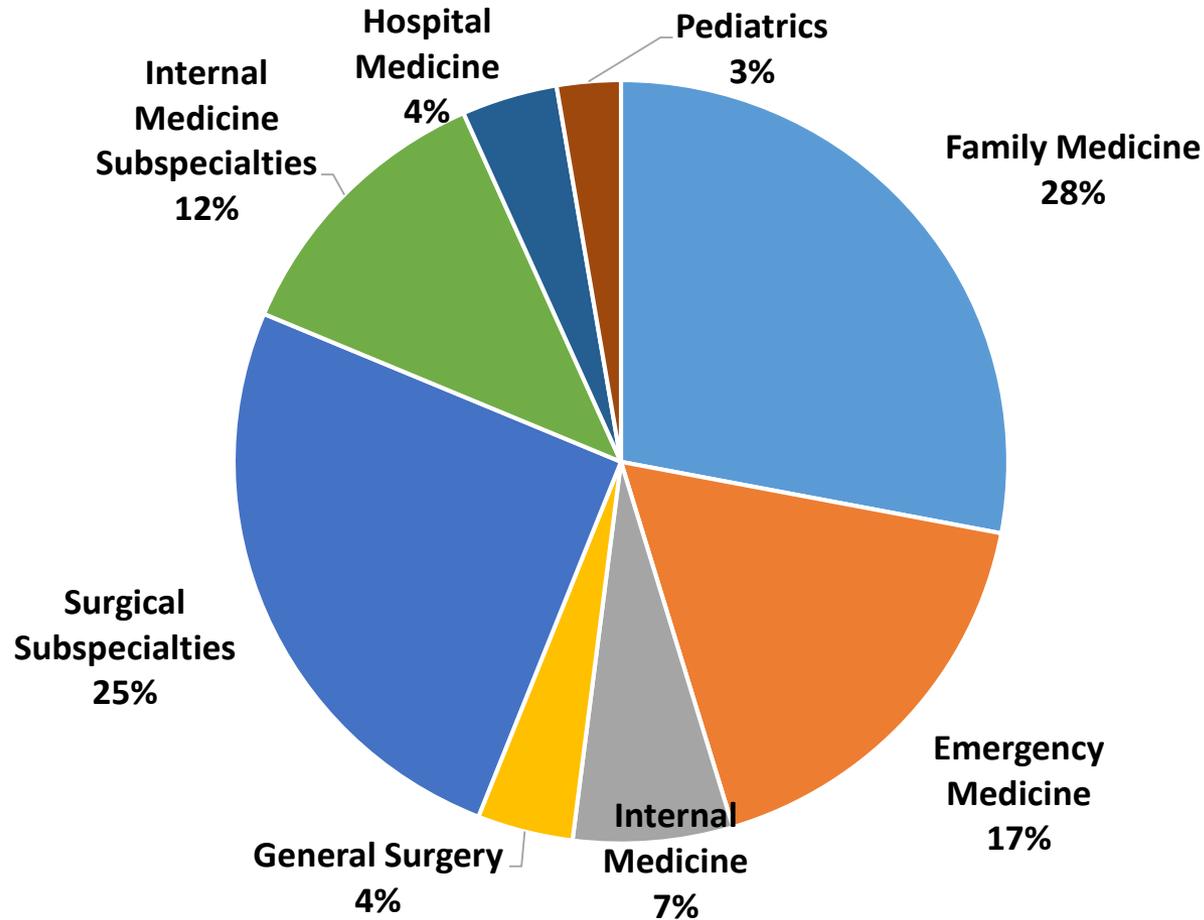
<https://www.bls.gov/ooh/healthcare/nurse-anesthetists-nurse-midwives-and-nurse-practitioners.htm>

Nurse Practitioner Specialties



<https://www.aanp.org/images/documents/research/2013-14nationalnpcensusreport.pdf>

Physician Assistant Specialties



<https://prodcmsstoragesa.blob.core.windows.net/uploads/files/2016StatisticalProfileofCertifiedPhysicianAssistants.pdf>

Quality of Care by APCs

- Literature supports APCs provide care that is:
 - Safe
 - Effective
 - Patient-centered
 - Timely
 - Efficient
 - Equitable
 - Evidenced based

Advanced Practice Clinician Strategy

Steering Committee Representation

Human Resources, Nursing, Medical Professional Affairs, Finance, Medical Management



Human Resource
Management



Operational
Alignment



Regulatory



Practice
Management



Messaging and
Marketing



2014

Initiative

2015 - 2016

Assessment

2017

Foundational
Implementation

2018

Sustainable
Operations

Who is the Advocate APC?



AMG

500
APRNs
94 PAs



Hospital- employed

125 APRNs
13 PAs



Aligned

319 APRNs
304 PAs

Human Resource Management

- **Recruitment**
- **Orientation**
- **Onboarding**
- Job descriptions
- Workforce planning
- Student clinical placement

Recruitment

Goal

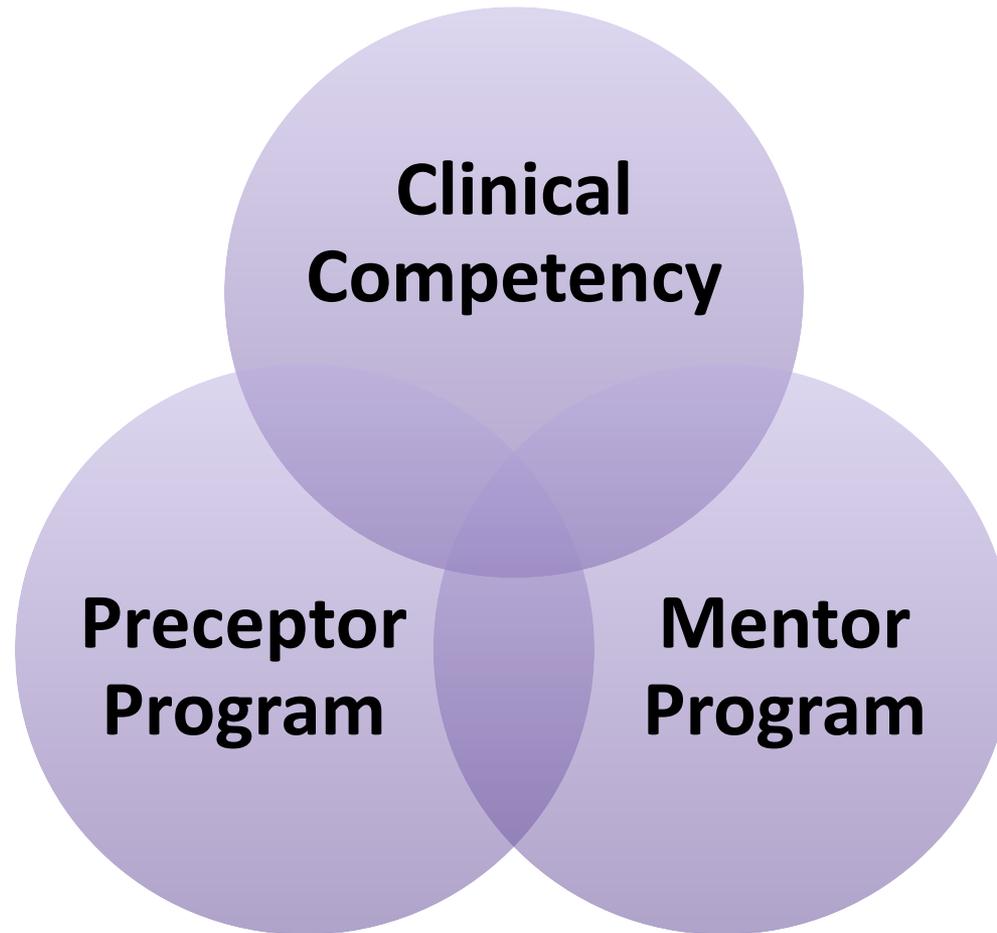
Create a strategic APC hiring process:

- Validates initial request
- Strategic placement

Accomplishments

- Targeted recruitment tools
- Integrated position justification
- Dedicated APC recruiter

APC Orientation and Onboarding



Orientation and Onboarding

Goal

Create evidenced-based APC orientation to:

- Increase retention
- Improve quality outcomes
- Address specialty care educational gap

Accomplishments

- Comprehensive onboarding program
- Dedicated position to support program

Operational Alignment

- **Productivity**
- **Business Case**
- **Billing**
- **Reimbursement**

Productivity

Goal

Optimize APC productivity

Accomplishments

- Key stakeholder support
- Benchmarks
- Best practice models
- Current state evaluation

Business Case

Goal

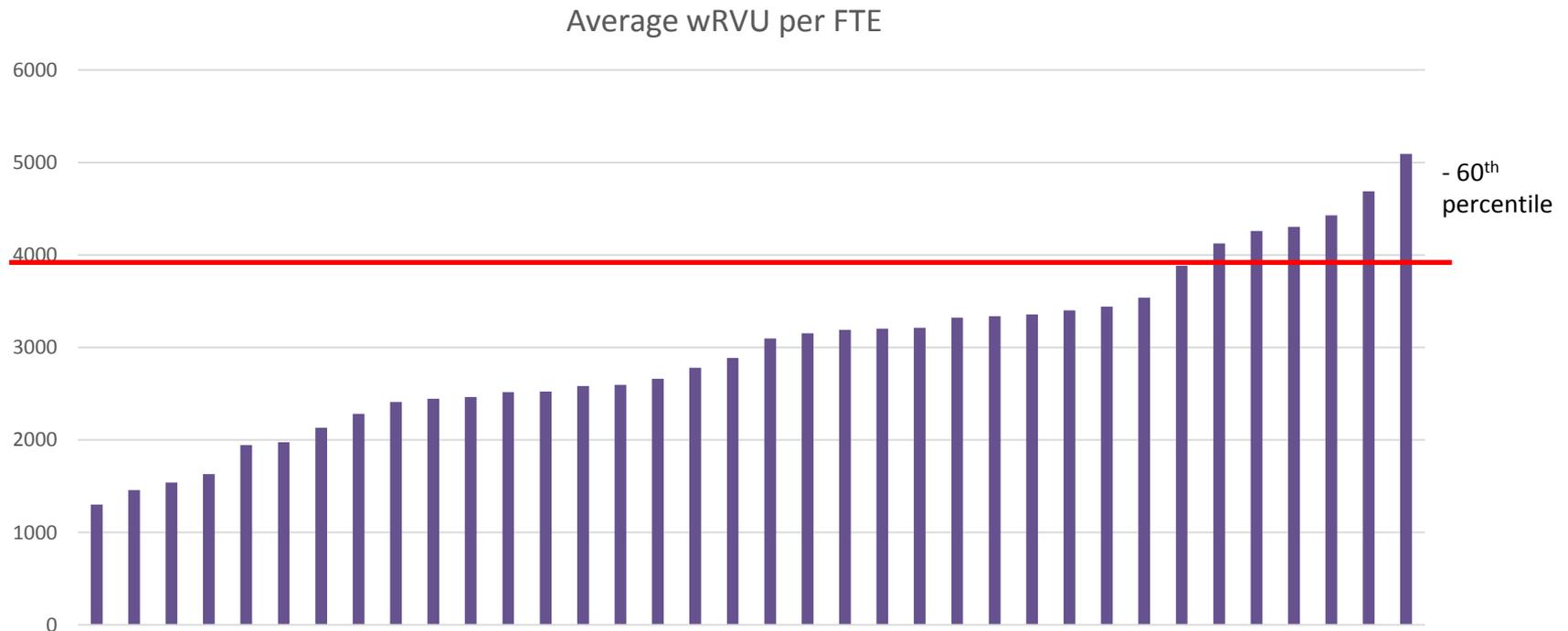
Create a streamlined and accountable process for strategic APC hires.

Accomplishments

- “Tool kit” to evaluate request
- Criteria and metrics to validate need

Primary Care APC Utilization

For the drilldown, we'll focus on practices with the highest and lowest primary care APC utilization.



Includes APCs with billing through December 2017 and a start date before January 2017.

Billing

Goal

Maximize APC billing potential

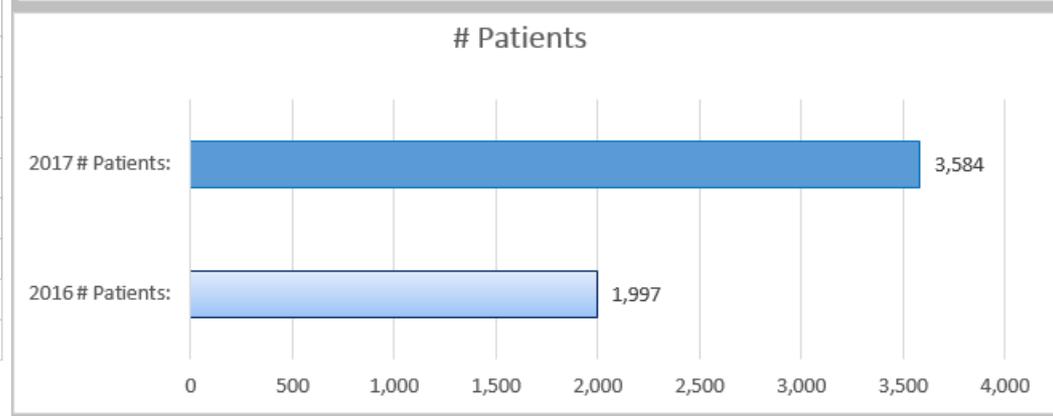
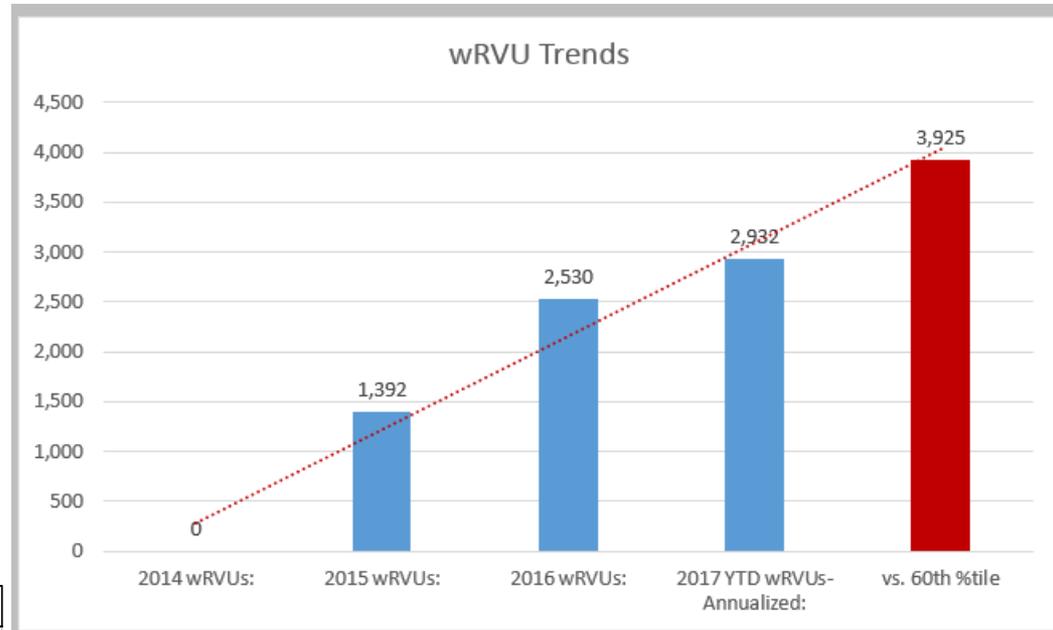
Accomplishments

- Establish billing standards
- Evaluate hospital team models
- Provide billing/coding education
- Create incentive compensation program

Individual APC Productivity

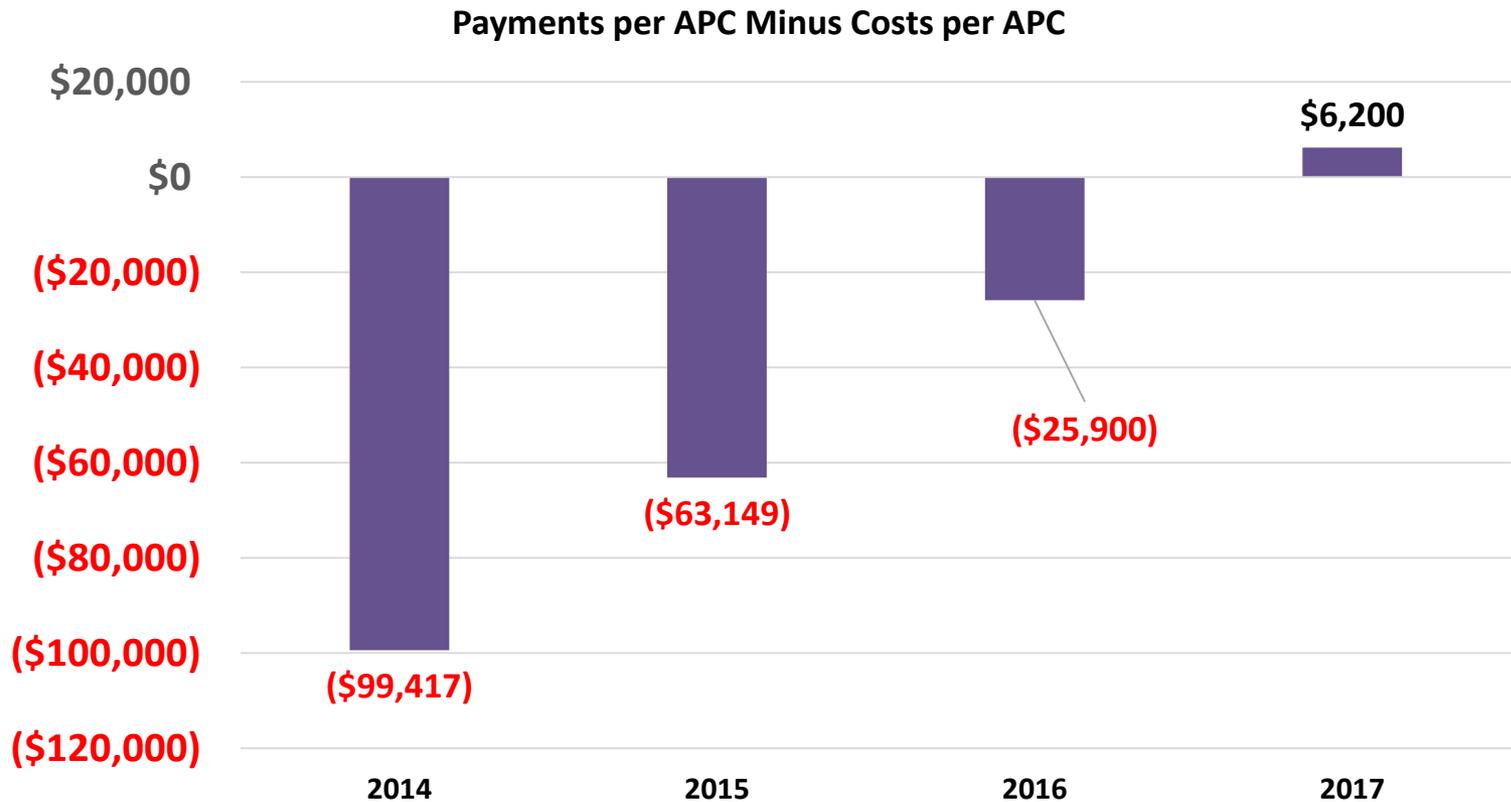
Name: *Drop Down Box Here>>
Specialty:
Service Area:
FTE Status:
Title:
Sullivan Cotter Specialty:
Collaborating Physician:
Hire Date:
Years Experience:

2017 Annualized	
2017 # Patients:	3,584
2017 # New Patients:	455
2017 # Established Patients:	3,129
2017 Charges:	767,702
2017 Charges per Patient:	214
2017 Payments:	355,808
2017 Payments per Patient:	99
2017 Collection %:	46.35%
2017 Payments per wRVU:	121.37



Billing and Costs

Employment costs near breakeven as APC billing increases



Source: IDX; includes APCs with billing data through December 2017
Analysis includes direct costs only.

Regulatory

- **By law rules and regulations**
- APRN Consensus Model
- APC policy and legislative advocacy

Regulatory

Goal

A standardized approach to APC top of license practice in all hospital bylaws.

Accomplishments

- Created a concise bylaws statement
- Updated credentialing guidelines
- Implementation in process
- Evaluated APRN consensus model

Practice Management

- Privileges
- FPPE/OPPE
- Quality profile
- Performance evaluation
- Credentialing
- Standard practice
- Peer review

Privileges

Goal

Standardize top of license privileges supported by site level competencies

Accomplishments

- Privileges complete
- Align privileges with core competency
- Roll out to Department Chairs
- Implementation planning underway

Quality Profile and Evaluation

Goal

Standardize quality evaluation

Accomplishments

- EHR attribution
- Data mining

Messaging and Marketing

- **Define the Advocate APC**
- Create an internal communication process
- Internal/External communication campaign

Messaging and Marketing

Goal

Define and embed the optimized role

Accomplishments

- System level focus groups for APCs/MDs
- Summarizing data
- Developed system level communication plan

Who is the Advocate APC?



And the Physicians...



APC Center of Excellence

The ultimate goal:

Create an APC Center of Excellence

Foundation:

- Voting member in AMG Governing Council
- APC Advisory Council
- Office of APCs

Future Vision

- Increasing acceptance of APCs in the delivery of healthcare
- APCs will be the dominant workforce delivering primary care
- APCs will play an enlarging role partnering with specialists
- Models of multiple APCs collaborating with a single physician will be common place
- Therefore we will see a shortage of APCs

Challenges

- Business model/education
- Hospital billing
- FPA/Top of License
- Compensation models
- Understanding role/Provider
- System support for APC strategy
- Educational gap

Lessons Learned

- Change takes time
- Complexity of Issue
- Ever evolving
- Differences in non-academic setting/large integrated setting
- APC/physician partnership

Questions for Discussion

- What type of compensation models are you using for specialty practices that include APCs?
- How are you addressing the educational gap for primary care APCs placed into specialty care settings?
- How are you optimizing top of license healthcare delivery for the provider team?



TOMORROW STARTS TODAY.